Division of Health Care Access and Accountability Employer Verification of Health Insurance Unit P.O. BOX 6530, Suite 100 Madison WI 53716-0530



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Mailing Date: 04/23/2010

State of Wisconsin

Department of Health Services

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Dear Employer,

At least one of your employees and/or their family members has applied for BadgerCare Plus. BadgerCare Plus is a federal/state program that pays health care providers to deliver essential health care services to low-income individuals, families, and pregnant women. More information about the program is available at www.badgercareplus.org.

State law requires employers to verify the health insurance benefits they offer to employees and/or family members who apply for BadgerCare Plus (S. 49.471 (9) Wis. Stats.). However, we have no current information on the health insurance benefits that you may offer.

Individuals who have access to employer-sponsored major medical health insurance plans may be denied enrollment into BadgerCare Plus if the employer pays a portion of the premium for the plan. Information regarding health insurance access and coverage must be verified before BadgerCare Plus enrollment can be determined.

Please provide this information by 5/28/10 by following these steps:

- 1. Navigate to the ACCESS web site: <u>access.wisconsin.gov</u>.
- 2. Click on the Employer login, located at the bottom right hand corner of the page.
- 3. Enter your Wisconsin User ID and Password. If you do not have a Wisconsin User ID and Password click on the "Request a Wisconsin User ID and Password" link. Creating a Wisconsin User ID and Password is a two step process and requires a valid, unique email address to be provided. Once the user ID and password is created, you will receive an email to activate the account. The account must be activated before you can enter your PIN below.
- 4. After entering your Wisconsin User ID and Password, enter the Personal Identification Number (PIN) below, if prompted to do so:

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5. Answer the on-line questions about health care benefits your company may offer.

Failure to provide this information by the due date may result in a penalty equal to the full per member per month cost of coverage under BadgerCare Plus for each of your current and any future employee(s), as well as their family members, who receive BadgerCare Plus (S. 49.471 (9) (c) Wis. Stats.). Penalties are levied monthly, may range from \$100 to \$300 per month for each employee and family member covered by BadgerCare Plus, and may accrue up to \$15,000 in any six month period depending on your total number of employees.

If you have any questions, comments, or would like to obtain a paper form to supply this information, please visit <u>access.wisconsin.gov</u> and click on the 'Learn More' button for Employers. You may also call our BadgerCare Plus Employer Customer Service at 1-866-710-2026. This number is available during the hours of 8:00am-4:00pm, Monday - Friday. You may be asked to provide your Employer ID, which is 0090001589.

Thank you for your cooperation.

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